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REVOCATION OF POWER OF ATTORNEY WITH **NEW POWER OF ATTORNEY** AND CHANGE OF CORRESPONDENCE ADDRESS

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	Application Number		09/729,434					
	Filing Date	December 5, 2000						
	First Named Inventor		Mitsuhiko Kadono					
	Art Unit	2125						
	Examiner Name	Sheela S. Rao						
	Attorney Docket Number	13.003-AG						

l hereby r	I hereby revoke all previous powers of attorney given in the above-identified application.										
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I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)											
			RE of Applicant			f Record	i				
Signature	MITSL	hiko kadon						*** ***********************************	**************************************		
Name Mitsuhiko Kadono											
Date	Octo	han , 16, 3	2006.	T€	elephone						
NOTE: Signature signature is requ	es of all the invent ired, see below*.	tors or assignees of record of		r their rep	resentative(s	s) are require	d. Submil	multiple fo	orms if more than one		
*Total of 1 forms are submitted.											

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.